

WEEKLY TALLY SHEET
BRIEF EDUCATIONAL AND SUPPORTIVE SERVICES (NOT ELSEWHERE INCLUDED)

PROVIDER NAME _____

PROVIDER # _____

Employee # _____

NUMBER OF CONTACTS OR NUMBER DISTRIBUTED

TYPE OF CONTACT	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL
In-person brief educational or supportive contact								
Telephone contact								
E-mail contact								
Material handed to people with no or minimal interaction								
Material mailed to people's homes								
Material left in public places								
Community networking and coalition building								

REVIEWED BY (PRINT) _____ SIGNATURE _____ DATE __/__/__

INSTRUCTIONS:
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Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0270. Public reporting burden for this collection of information is estimated to average 5 minutes per client per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 7-1044, Rockville, Maryland, 20857.

When to Use This Form:

1. This sheet is intended to capture all of the contacts you have had for a particular week AND they have not been captured on any other form.
 - a. In other words, if you have completed an Individual Crisis Counseling Services Encounter Log Form for someone, or if you have counted someone as a participant on the Group Encounter Log Form, you will **not** count them here.

NUMBER OF CONTACTS OR NUMBER DISTRIBUTED – For each day of the week, fill in the total number of contacts for each of the following types:

IN-PERSON BRIEF EDUCATIONAL OR SUPPORTIVE CONTACT – This is the number of brief contacts with individuals, or groups of individuals, that did not result in in-depth discussion or interaction of an educational or crisis counseling nature.

TELEPHONE CONTACT – This is the number of brief telephone contacts with individuals that did not result in in-depth discussion or interaction of an educational or crisis counseling nature.

EMAIL CONTACT – This is the number of brief email contacts with individuals that did not result in in-depth discussion or interaction of an educational or crisis counseling nature.

MATERIAL HANDED TO PEOPLE WITH NO OR MINIMAL INTERACTION – How many materials were distributed by handing them out to people with no or minimal contact?

MATERIAL MAILED TO PEOPLE'S HOMES – How many materials were mailed to people's homes?

MATERIAL LEFT IN PUBLIC PLACES – How many materials were left in public places?

COMMUNITY NETWORKING AND COALITION BUILDING – How many people did you come into contact with for the purpose of networking within the community or building local coalitions?

STOP! Please submit the completed form to the designated person in your agency who will review and sign the form. ***Thanks for taking the time to complete this form accurately!***